

Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER	LICENSE NUMBER
Sound View	751821
Senior Living	
LLC	

NOTE: The term "the home" refers to the adult family home / provider listed above.

The scope of care, services, and activities listed on this form may not reflect all required care and services the home must provide. The home may not be able to provide services beyond those disclosed on this form, unless the needs can be met through "reasonable accommodations." The home may also need to reduce the level of care they are able to provide based on the needs of the residents already in the home. For more information on reasonable accommodations and the regulations for adult family homes, see Chapter 388-76 of Washington Administrative Code. Table of Contents

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Received

JAN 05 2015

RCS/Public Disclosure

About the Home		
1. PROVIDERS STATEMENT (O	PTIONAL)	
home. Sound View squality care to vulnera	ement is free text description of the mission, values, and/or other distinct attributes of the Senior Living is located in Steilacoom, WA with a commitment to providing ble adults. Our staff is highly qualified to assist seniors with all aspects of and nurturing home environment.	
2. INITIAL LICENSING DATE	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:	
November, 2010	None	
4. SAME ADDRESS PREVIOUSI	Y LICENSED AS:	
5. OWNERSHIP		
Sole		
proprietor Limited Liability Corp	oration Co.	
owned by: Kristi	webster &	
Marcus Rogers		
Other:		
	Personal Care	

"Personal care services" means both physical assistance and/or prompting and supervising the performance of direct personal care tasks as determined by the resident's needs, and does not include assistance with tasks performed by a licensed health professional. (WAC 388-76-10000)

1. EATING

If needed, the home may provide assistance with eating as follows: **Meal Planning, Purchasing, Meal Preparation,**Serving, Cleaning, and assistance with prompting and supervising the eating of meals. Reminding to eat and drink, assist with cutting up food. Feed clients if needed to be fed. Three meals per day provided, and nutritious snacks. Nutritious meals planned for low sodium diets, general diabetic diets, and mechanical soft diets as needed.

2. TOILETING

If needed, the home may provide assistance with toileting as follows: *Physically help to and from toilet. Help with incontinent products and help to clean. Urinary catheter care, cleaning and changing bag. Care for bladder incontinence, including routinely cleaning as necessary. Care for bowel incontinence, including routinely cleaning as necessary. One on One assist, personal hygiene, peri-care.*

3. WALKING

If needed, the home may provide assistance with walking as follows: Remind clients to move between locations in home. Provide stand-by assistance as client walks and moves about the home. Physically assist to walk or move about the home. Sit to stand assistance both physically with help and with lift.

4. TRANSFERRING

If needed, the home may provide assistance with transferring as follows: Remind or cue clients. Routinely provide stand-by assistance while client transfers into and out of bed, or wheelchair, or onto and off of a toilet or shower chair. One-person physical assistance with transferring. Two-person physical assistance with transferring. Lifting with mechanical equipment.

5. POSITIONING

If needed, the home may provide assistance with positioning as follows: Remind and cue clients to reposition. Assist with positioning in bed, chair, and wheel chairs.

6. PERSONAL HYGIENE

If needed, the home may provide assistance with personal hygiene as follows: Assistance with ADLs, remind clients to comb hair, brush teeth, shave, wash face and hands. Set out personal hygiene and grooming items. Assist with peri-care, cutting hair, trimming hair, shaving, styling hair, brushing teeth, lotion to body, deodorant, apply make-up as needed.

7. DRESSING

If needed, the home may provide assistance with dressing as follows: Remind and cue clients to put on, take off, and lay out clothes, prostheses. One on one assist as necessary, assist with clothing selection, wardrobe maintenance, laundry. Assist with button/buckle/fasten of clothes. Dress and undress if unable to dress self.

8. BATHING

If needed, the home may provide assistance with bathing as follows: Remind to wash and dry all areas of body, provide stand-by assistance getting into and out of the shower. Physical assistance getting into out of shower. Help wash areas that are hard to reach. Total bathing assistance if needed. Bed baths.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

We contract with local business at Senior Center for in-home podiatry care every six weeks. Local hair stylist comes to home for haircuts, perms, styling of client's hair.

authorized person, the home must have systems in place to ensure the services provided meet the medication needs of each resident and meet all laws and rules relating to medications. (WAC 388-76-10430)
The type and amount of medication assistance provided by the home is:
Remind to take medications, handing and opening assistance.
Putting medications in hands. Medication Management,
Ordering Medication, Communication with Physicians and
Pharmacies, Medication Packs Filled by RN. Medication
administration and assistance and all Nurse Delegation Tasks.
ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES
Skilled Nursing Services and Nurse Delegation
If the home identifies that a resident has a need for nursing care and the home is not able to provide the care per chapter 18.79 RCW, the home must contract with a nurse currently licensed in the state of Washington to provide the nursing care and service, or hire or contract with a nurse to provide nurse delegation. (WAC 388-76-10405)
The home provides the following skilled nursing services: RN contracted for all NURSE DELEGATION, medi-paks filled as needed by RN.
The home has the ability to provide the following skilled nursing services by delegation:
We use nursing assistants NAC under the delegation of a registered nurse
to administer Eye Drops, Creams to skin, Ear Drops, Catheter care, and
PRNs
ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION
RN is available for annual assessments, 3 month assessments for nurse
delegation, 24 hour text messages for any questions of care for clients
Specialty Care Designations
We have completed DSHS approved training for the following specialty care designations:
Developmental disabilities Mental illness
Dementia
ADDITIONAL COMMENTS REGARDING SPECIALTY CARE DESIGNATIONS

Staffing

Medication Services

If the home admits residents who need medication assistance or medication administration services by a legally

who lives in the home and is responsible for the care and services of each resident at all times. The provider, entity representative, or resident manager is exempt from the requirement to live in the home if the home has 24-hour staffing coverage and a staff person who can make needed decisions is always present in the home. (WAC 388-76-10040)
The provider lives in the home. A resident manager lives in the home and is responsible for the care and services of each resident at all times. The provider, entity representative, or resident manager does not live in the home but the home has 24-hour staffing coverage, and a staff person who can make needed decisions is always present in the home.
The normal staffing levels for the home are:
Registered nurse, days and times: On Call available through phone and text messages 24 hours daily
Licensed practical nurse, days and times:
Certified nursing assistant or long term care workers, days and times: All employees are NAC credentialed
Awake staff at night Other:
ADDITIONAL COMMENTS REGARDING STAFFING
Cultural or Language Access
The home must serve meals that accommodate cultural and ethnic backgrounds (388-76-10415) and provide informational materials in a language understood by residents and prospective residents (Chapter 388-76 various sections)
The home is particularly focused on residents with the following background and/or languages: We welcome and accommodate ALL cultures and backgrounds including meal preferences, soft diet meals, allergies to foods, low sodium meals. ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS We have hired a diverse staff and welcome clients of all
ethnicities and backgrounds. Their personal preferences
determine our menu planning as well as dietary needs.
Medicald Medicald
The home must fully disclose the home's policy on accepting Medicaid payments. The policy must clearly state the circumstances under which the home provides care for Medicaid eligible residents and for residents who become eligible for Medicaid after admission. (WAC 388-76-10522)
The home is a private pay facility and does not accept Medicaid payments.
The home will accept Medicaid payments under the following conditions:
ADDITIONAL COMMENTS REGARDING MEDICAID

Activities

The home must provide each resident with a list of activities customarily available in the home or arranged for by the home (WAC 388-76-10530).

The home provides the following:

Weekly and Seasonal Activities, crafts, walking, watching movies and sports programs, music, physical movement, reading, drawing, summer concerts, outings, Community Center events,

ADDITIONAL COMMENTS REGARDING ACTIVITIES

We also take residents on outings as

they are able to manage